



PETITIONER  
NAME &  
ADDRESS

# TOWN OF SEEKONK

## PLANNING BOARD

LOCATION (from Assessors' Office)  
PLAT AND  
LOT NOS.

PRESENT

ZONING

DATE OF THIS  
DOCUMENT

First Record Date

Planning Board Use Only

FILE:

TITLE:



FORM

## APPLICATION FOR ZONING CHANGE

To the Planning Board of the Town of Seekonk, Massachusetts:

The undersigned, being the applicant as defined by the Laws of the Commonwealth of Massachusetts, request the Seekonk Planning Board to present the following proposed zoning change at the next Town Meeting.

A. Land involved: Plat and Lot Nos. \_\_\_\_\_

B. Present Zone of said Land \_\_\_\_\_

C. Requested Zone of said Land \_\_\_\_\_

D. Drawing herewith (scale 1" = 40')

E. Legal Description of Property

F. List of Abutters herewith (Form G)

G. \$75.00 minimum filing fee. Applicant is to reimburse the Town of Seekonk for any additional costs.

Applicant's Comments:

Received by Planning Board or Town Clerk

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Signature: \_\_\_\_\_

Payment Rec'd. \_\_\_\_\_

\_\_\_\_\_  
Address of applicant

\_\_\_\_\_  
Owner's signature & address if not  
the applicant